Effective December 29, 1999 09/503089											9	
		SMAI TYP	LENT	_	OR	OTHER SMALL E						
FO	R	NUMBE	A FILED	NUMBER E	NUMBER EXTRA		F	EE		RATE	FEE	
BAS	SIC FEE						34	5.00	OR		690.00	
TO	TAL CLAIMS	35	minus 20	= 5	. 5		=		OR	X\$18=	90	
IND	EPENDENT CLA	ims 8	minus 3	=: 5_	: 5				OR	X78=	390	
MULTIPLE DEPENDENT CLAIM PRESENT						+130	_		OR	+260=		
* If the difference in column 1 is less than zero, enter "0" in column 2						TOTA			OR	TOTAL	170	
CLAIMS AS AMENDED - PART II											OTHER THAN SMALL ENTITY	
(Column 1) (Column 2) (Column 3)						SMA	LL ENT	П	OR _	SMALL		
MA		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RAT	ETIC	DI- NAL EE		ŖATE	ADDI- TIONAL FEE	
AMENDMENT	Total	22	Minus	- 25		X\$ 9	=	,	OR	X\$18=	$\sum \Delta$	
MEN	Independent	8	Minus	··· 8		X39			OA	X78=	X	
•	FIRST PRESEN	ITATION OF MI	JLTIPLE DEPI	ENDENT CLAIM	ئـــــــ	+130	_		OR	+260=	$/ \mid \mid$	
							TAL -		OR	TOTAL		
•							EE		Jon ,	ADDIT, FEE		
		(Column 1)		(Column 2)	(Column 3)							
INT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RAT	E TIC	DDI- DNAL EE	P	RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	. 10	Minus	. 25	- 12	X\$ 9	-		OR	X\$18=		
WE!	Independent	· 6	Minus	<u>(</u>	- 2	X39			OR	X78=		
F	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM-)=		OR	+260=	/	
l							TAL		OR	TOTAL		
	-11.	ADDIT.	FEE L			ADDIT. FEE						
	2/2/06	(Column 1)			(Column 3)				_			
NTC	7	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RAT	E TK	DDI- ONAL EEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	• 9	Minus	. 25	2 -	XS) <u> </u>		OR	X\$18=		
	Independent	• 6	Minus	··· 8	·	X39	-		OR	X78=		
Ľ	FIRST PRESE	NTATION OF A	AULTIPLE DEI	PENDENT CLAIM		 	-		1 "			
Γ						+13	O= STAL		OR			
	the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."								OR	ADDIT. FEI		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." *** ADDIT. FEE												

Application or Docket Number